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Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District of: Illinois	
(State) Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Daphaney	
	Write the name that is on	First name	First name
	your government-issued picture identification (for example, your driver's	Middle name	Middle name
	license or passport	West Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you	Daphaney	
	have used in the last 8 years	First name	First name
	•	Middle name	Middle name
	Include your married or maiden names.	Walker Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social	XXX - XX- 4381	
	Security number or federal Individual	OR	OR
	Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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D	ebtor 1 Daphaney		Case number (if known)
_	First Name	Middle Name Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		715 N Lamon Ave Apt 2 Number Street	Number Street
		Chicago Illinois 60644	
		City State Zip Code	City State Zip Code
		Cook County	County
		•	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	btor 1 Daphaney	We		Case number (if know	vn)
	First Name	Middle Name Last	t Name		
Pa	rt 2: Tell the Court Abo	out Your Bankruptcy Case			
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of Bankruptcy (Form B2010)). Also, go of Chapter 7 Chapter 11 Chapter 12 Chapter 13			
8.	How you will pay the fee	more details about how you m cashier's check, or money orde may pay with a credit card or c I need to pay the fee in instal Individuals to Pay Your Filing I request that my fee be waiv judge may, but is not required the official poverty line that ap	nay pay. Typically, if your attorney is check with a pre-printed liments. If you choose Fee in Installments (Owed (You may request to, waive your fee, an oplies to your family sinust fill out the Application.	ou are paying the submitting your ed address. this option, sign this option only d may do so only ze and you are upon the submitted of the su	the clerk's office in your local court for fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of nable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
9.	Have you filed for bankruptcy within the last 8 years?	No. ✓ Yes. District District District	of Illinois When When When	MM / DD / YYYY	Case number 13-bk-41270 Case number Case number
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No. Yes. Debtor District Debtor District	When When	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11.	Do you rent your residence?	No. Go to line 12.	ement About an Eviction		you want to stay in your residence? t You (Form 101A) and file it with

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West Debtor 1 Daphaney __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Daphaney
 West
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Daphaney First Name	West Middle Name Last N		(if known)
	estions for Reporting Purposes	varre	
16. What kind of debts do you have?	16a. Are your debts primarily con "incurred by an individual pri No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily bus	marily for a personal, family, or h siness debts? Business debts ar stment or through the operation	re debts that you incurred to obtain of the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fund No.		pt property is excluded and administrative secured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	
Part 7: Sign Below	Lhava avancia ad this matition, and t		that the information provided is true and
For you	correct. If I have chosen to file under Chapt of title 11, United States Code. I ununder Chapter 7. If no attorney represents me and I cout this document, I have obtained I request relief in accordance with the I understand making a false statem connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 151	ter 7, I am aware that I may proceed the relief available understand the relief available understand the relief available understand the notice required by the chapter of title 11, United Statent, concealing property, or obtained a can result in fines up to \$250,009, and 3571.	eed, if eligible, under Chapter 7, 11,12, or 13 der each chapter, and I choose to proceed one who is not an attorney to help me fill 11 U.S.C. § 342(b). ates Code, specified in this petition. aining money or property by fraud in 00, or imprisonment for up to 20 years, or
	Signature of Debtor 1 Executed on1/5/2017	•	ure of Debtor 2 uted on
	MM / DD / Y		MM / DD / YYYY

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Debtor 1 Daphaney		West	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	der Chapter 7, 11, 1	2, or 13 of title 11, United	nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. §	342(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge after	an inquiry that the	information in the sched	ules filed with the petition is incorrect.
attorney, you do not	4.5			
need to file this page.	/s/ Ryan P Crotty		Date	1/5/2017
	Signature of Attorney f	or Debtor		IM / DD / YYYY
	Ryan P Crotty			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street			
	Street			
	28th Floor			
	-			
	Chicago		Illinois	60603
	City		State	Zip Code
	Contact phone	3128374032	Email address	rcrotty@semradlaw.com
	6312602		Illinois	<u> </u>
	Bar number		State	

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Fill in this information to identify your case:					
Debtor 1	Daphaney		West		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Sankruptcy Court for the:	Northern	District of Illinois		
Case number (If known)			(State)		

Check if this is an	
amended filing	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	Ф0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$925.00
1c. Copy line 63, Total of all property on Schedule A/B	\$925.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Ф0.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
Ob Conv. the testel eleiner from Dat O /a convinit vivos account eleines) from line Ci of Cab advil 5/5	\$30,651.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$30,651.00
Your total liabilitie	
Your total liabilitie	L
Your total liabilitie Part 8: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I)	\$1,495.61
Your total liabilitie	\$1,495.61

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Del	btor 1 Daphaney		West	Case number (if known)	
	First Name	Middle Name	Last Name		
Part	Answer These Ques	stions for Administrat	tive and Statistical Recor	rds	
6.	Are you filing for bankruptcy	under Chapters 7, 11, o	r 13?		
	No. You have nothing to r	eport on this part of the fo	orm. Check this box and subm	it this form to the court with your oth	er schedules.
	✓ Yes.				
7. \	What kind of debt do you hav	/e?			
			umer debts are those incurred but incurred but lines 8-10 for statistical	oy an individual primarily for a person purposes. 28 U.S.C. § 159.	al,
	Your debts are not prime this form to the court with		ou have nothing to report on the	nis part of the form. Check this box a	nd submit
8.	From the Statement of Your Form 122A-1 Line 11; OR, Fo			nthly income from Official	\$1,786.54
9.	Copy the following special	categories of claims fro	om Part 4, line 6 of Schedule	E/F:	
	From Part 4 on Schedule E	E/F, copy the following:		Total claim	
	9a. Domestic support obliga	tions (Copy line 6a.)		\$0.00	<u> </u>
	9b. Taxes and certain other	debts you owe the govern	ment. (Copy line 6b.)	\$0.00	<u>—</u> .
	9c. Claims for death or person	onal injury while you were	intoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy line	e 6f.)		\$7,951.00	
			or divorce that you did not repo	ort as \$0.00	
	priority claims. (Copy line 6g	.)		\$0.00	
	9f. Debts to pension or profi	t-sharing plans, and other	similar debts. (Copy line 6h.)		
	9g. Total. Add lines 9a throu	ıgh 9f.		\$7,951.00	

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Fill in this	information	to identify your o	case:				
Debtor 1	Daph			West			
Debtor 2		Name	Middle N	lame Last Name			
(Spouse, if f	iling) First I	Name	Middle N	lame Last Name			
United St	ates Bankrup	tcy Court for the:	Northern	District of Illinois (State)			
Case nun	nber			(Giate)			
Officia	al Form	106A/B					Check if this is an amended filing
Sche	dule A	/B: Prope	erty				12/1
category responsib	where you t le for supply r name and	hink it fits best. I ring correct infor case number (if l	Be as complete a rmation. If more s known). Answer e	st an asset only once. If an asse nd accurate as possible. If two pace is needed, attach a separ very question. nd, or Other Real Estate Yo	married people a ate sheet to this	are filing together, both a form. On the top of any a	are equally
1. Do yo			quitable interest	n any residence, building, land	, or similar prope	erty?	
✓	No. Go to F	Part 2 is the property?					
1.1	Street addre	ess, if available, or	other description	What is the property? Check a Single-family home Duplex or multi-unit building Condominium or cooperativ)	the amount of any secu	claims or exemptions. Put ared claims on <i>Schedule D:</i> aims Secured by Property. Current value of the portion you own?
				Manufactured or mobile hon	ne	————	————
	Number	Street		Land		Describe the nature of	f vour ownership
				Investment property Timeshare		interest (such as fee s the entireties, or a life	simple, tenancy by
	City	State	Zip Code	Other			
				Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a		Check if this is co (see instructions)	ommunity property
				Other information you wish to property identification number	add about this	item, such as local	
If you		e more than one, I		What is the property? Check a Single-family home Duplex or multi-unit building Condominium or cooperativ Manufactured or mobile hom	g re	the amount of any secu	claims or exemptions. Put tred claims on Schedule D: nims Secured by Property. Current value of the portion you own?
	Number	Street		Land Investment property		Describe the nature of interest (such as fee s	simple, tenancy by
	City	State	Zip Code	Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a	another	(see instructions)	e estate), if known.

property identification number:

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Debtor 1	Daphaney First Name Middle		number (if known)
1.3Stre	First Name Middle et address, if available, or other descripti	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check of Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own? Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Check if this is community property
	the dollar value of the portion you or ve attached for Part 1. Write that nu		<u></u>
Do you ow you own t		interest in any vehicles, whether they are registere vehicle, also report it on Schedule G: Executory Contract, motorcycles	•
✓ No ☐ Ye 3.1	s Make	Who has an interest in the property? Ch	·
	Model: Year: Approximate mileage: Other information:	one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions)	
3.2	Make Model: Year:	Who has an interest in the property? Chone.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	Approximate mileage: Other information:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions)	

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	Daphaney First Name	Middle Name	West Last Name	Case numbe		
3.3	Make Model: Year: Approximate mileage:		Who has an interest in the prone. Debtor 1 only Debtor 2 only	roperty? Check	Do not deduct secured the amount of any secu <i>Creditors Who Have Cla</i> Current value of the	red claims on <i>Schedule</i>
	Other information:		Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions)	and another	entire property?	portion you own?
3.4	Make Model: Year: Approximate mileage:		Who has an interest in the prone. Debtor 1 only Debtor 2 only	roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the	rred claims on Schedule nims Secured by Property Current value of the
	Other information:		Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions)	and another	entire property?	portion you own?
					_	
Exar	nples: Boats, trailers, motors No Yes	•	er recreational vehicles, other v , fishing vessels, snowmobiles, m	otorcycle accessori	es	claims or exemptions.
Exar	nples: Boats, trailers, motors No Yes	•		otorcycle accessori		ıred claims on <i>Schedule</i>
Exar	nples: Boats, trailers, motors No Yes Make Model: Year:	•	who has an interest in the prone. Debtor 1 only	otorcycle accessori roperty? Check / and another	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Propert
4.1	nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage:	•	who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi	otorcycle accessori roperty? Check / and another ty property (see	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule

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De	btor 1	Daphaney		West	Case number (if known)	
		First Name	Middle Name	Last Name		_
Pa	t 3:	Describe Y	our Personal and Househo	ld Items		
De	o you	own or hav	e any legal or equitable into	erest in any of the follov	ving items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		_	and furnishings liances, furniture, linens, china, kit	tchenware		
	No					
✓	Yes. D	escribe	Used Furniture and Household G	oods		\$350.00
		ronics les: Television	s and radios; audio, video, stereo,	, and digital equipment; comp	outers, printers, scanners; music	
V		escribe	Used Home Electronics and Cell F	Phone		\$150.00
	Examp No	stamp, co	ue and figurines; paintings, prints, or in, or baseball card collections; ot			
Ш	Yes. L	escribe				
		les: Sports, ph	rts and hobbies notographic, exercise, and other h s; carpentry tools; musical instrur		ool tables, golf clubs, skis; canoes	
	Yes. D	escribe				
	0. Fire Examp		es, shotguns, ammunition, and re	elated equipment		
✓	No					7
Ш	Yes. D	escribe				
	-		clothes, furs, leather coats, design	ner wear, shoes, accessories		
片	No Voc F	escribe	Lload Clathing			1
⊻	165. L	escribe	Used Clothing			\$250.00
	2. Jew Examp No	-	ewelry, costume jewelry, engagen er	nent rings, wedding rings, he	irloom jewelry, watches, gems,	
		escribe	Used Costume Jewelry			1
			·			\$150.00
		-farm animal les: Dogs, cat	s, birds, horses			
✓	No					
	Yes. D	escribe				
	_	other persor	al and household items you did	d not already list, including	any health aids you did not list	
✓	No					1
	Yes. D	escribe				
			llue of all of your entries from F		s for pages you have attached	\$900.00

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Debt	or 1 Daphaney First Name	Middle Name	West Last Name	Case number (if known)	
Part 4		Financial Assets	<u> Last</u> i tamo		
		ny legal or equitable interest	in any of the follov	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. (xamples: Money you ha	ave in your wallet, in your home, in	·	d on hand when you file your petition Cash:	
17.		savings, or other financial accounts; nstitutions. If you have multiple acc		shares in credit unions, brokerage houses, astitution, list each.	
	No ✓ Yes		Institution name:		
		17.1. Checking account:			
		17.2. Checking account:			
		17.3. Savings account:	Bank of America		\$25.00
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.		or publicly traded stocks s, investment accounts with broker	age firms, money mark	et accounts	
	Yes	Institution or issuer name:			
					<u> </u>
19.	Non-publicly traded san LLC, partnership,		ted and unincorporat	ed businesses, including an interest in	
	✓ No	•			
	Yes. Give specific information about	Name of entity		% of ownership:	
	them				

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Debt	tor 1 Daphaney	Middle Noves	West	Case number (if known)	
	First Name	Middle Name	Last Name		
20.		orate bonds and other negotial			
		include personal checks, cashiers ents are those you cannot transfe			
	✓ No	,		ng or company mann	
	Yes. Give specific information about	Issuer name:			
	them	Toddol Trainer			
		-			-
21.	Retirement or pension				<u> </u>
	Examples: Interests in IF	RA, ERISA, Keogh, 401(k), 403(b)), thrift savings accoun	its, or other pension or profit-sharing plans	
	✓ No	Type of accounts	Institution name.		
	Yes. List each	Type of account:	Institution name:		
	account separately.	401(k) or similar plan:			
		Pension plan:			
		IRA:			
		Retirement account:			-
		Keogh:			_
		Additional account:			_
		Additional account:			
00					
22.	Security deposits and Your share of all unused	prepayments I deposits you have made so that	vou may continue ser	vice or use from a company	
	Examples: Agreements v	with landlords, prepaid rent, publi			
	companies, or others				
	✓ No		Institution name:		
	Yes	Electric:	-		
		Gas:			
		Heating oil:			_
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or f	for a number of years)	-
	✓ No				
	Yes	Issuer name and description:			
	_				

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Debt	or 1 Daphaney	No. 1 is No.	West	Case number (if known)	
0.4	First Name	Middle Name	Last Name		
24.		n education IRA, in an account in a c 330(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or unde	er a qualified state tuition program.	
	✓ No Yes	Institution name and description. Separ	rately file the records of any interes	sts.11 U.S.C. § 521(c):	
0.5	Tweete equito	hla au futuus intanasta in muanautu (a	show there can think listed in line	4) and violate as navious	
25.		ble or future interests in property (or or your benefit	tner tnan anytning listed in line	1), and rights or powers	
	✓ No Yes. Descr	ibe			
26.	Patents, copy	rights, trademarks, trade secrets, a	nd other intellectual property		
	Examples: Inte	rnet domain names, websites, proceeds	s from royalties and licensing agre	ements	
	Yes. Descr	ibe			
27.	Licenses fran	chises, and other general intangible	os.		
	Examples: Buil	ding permits, exclusive licenses, cooper		licenses, professional licenses	
	✓ No				
	Yes. Descr	1be			
Mor	ney or proper	ty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or proper Tax refunds ow				portion you own? Do not deduct secured
					portion you own? Do not deduct secured
	Tax refunds ow			Federal:	portion you own? Do not deduct secured
	Tax refunds ow No Yes. Give s about you a	pecific information them, including whether lready filed the returns		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds ow No Yes. Give s about you a and th	pecific information them, including whether lready filed the returns ne tax years			portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds ow No Yes. Give s about you a and th	pecific information them, including whether lready filed the returns ne tax years	oport, child support, maintenance,	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past	pecific information them, including whether lready filed the returns the tax years	oport, child support, maintenance,	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past	pecific information them, including whether lready filed the returns ne tax years	port, child support, maintenance,	State: Local: divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past	pecific information them, including whether lready filed the returns the tax years	oport, child support, maintenance,	State: Local: divorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t
28.	Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past	pecific information them, including whether lready filed the returns the tax years	oport, child support, maintenance,	State: Local: divorce settlement, property settlemen Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past	pecific information them, including whether lready filed the returns the tax years	port, child support, maintenance,	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past No Yes. Give s Other amounts Examples: Unpa	pecific information them, including whether lready filed the returns the tax years	s, disability benefits, sick pay, vac	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past No Yes. Give s Other amounts Examples: Unpa	pecific information them, including whether lready filed the returns ne tax years t due or lump sum alimony, spousal sup pecific information	s, disability benefits, sick pay, vac	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give s about you a and ti Family support Examples: Past No Yes. Give s Other amounts Examples: Unpa	pecific information them, including whether lready filed the returns ne tax years t due or lump sum alimony, spousal sup pecific information	s, disability benefits, sick pay, vac	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Daphaney		West	Case number (if known)	
	First Name	Middle Nar	ne Last Name		
31.	Interests in insurance Examples: Health, disa		ealth savings account (HSA); credit, h	nomeowner's, or renter's insurance	
	No Yes. Name the ins of each policy and		Company name:	Beneficiary:	Surrender or refund value:
20	Any interest in prope	why that is due you from	m someone who has died		_
32.		ry of a living trust, expe	ct proceeds from a life insurance polic	y, or are currently entitled to receive	
	Yes. Describe				
33.	Examples: Accidents, e	•	ot you have filed a lawsuit or made surance claims, or rights to sue	a demand for payment	
	✓ Yes. Describe	Potential Fraud Claim	Against CET		
34.		d unliquidated claims	of every nature, including counter	claims of the debtor and rights	
	to set off claims No				
	Yes. Describe				
35.	Any financial assets	you did not already lis	t		
	Yes. Describe				
36.		-	om Part 4, including any entries fo		\$25.00
Part	5: Describe Any E	Business-Related P	roperty You Own or Have an I	nterest In. List any real estate in Pa	rt 1.
37.	Do you own or have a	ny legal or equitable	interest in any business-related pr	operty?	
	No. Go to Part 6. Yes. Go to line 38				Current value of the portion you own? Do not deduct secured claims
38.	Accounts receivable		Iready earned		or exemptions
	✓ No ☐ Yes. Describe				
39.	Office equipment, fur Examples: Business-re			achines, rugs, telephones, desks, chairs, ele	ectronic devices
	No Yes. Describe				

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Deb	tor 1 Daphaney		e number <i>(if known)</i>	
1.0	First Name	Middle Name Last Name		
40.	macninery, fixtures, e	quipment, supplies you use in business, and tools of your trade		
	✓ No			
	Yes. Describe			
11	Inventory			
41.	Inventory			
	✓ No			
	Yes. Describe			
42	Interests in partnersh	ins or joint ventures		
		po or joint rontaroo		
		Name of entity:	% of ownership:	
	Yes. Give specific	,	·	
	information about them			
43.	Customer lists. mailing	lists, or other compilations		-
	— ·	,		
	No No		4 400	
	Yes. Do your lists if	nclude personally identifiable information (as defined in 11 U.S.C. § 101(4	TA))?	
	No			
	Yes. Desc	ribe		
44.	Any business-related	property you did not already list		
	✓ No			
	Yes. Give specific			
	information			<u> </u>
				<u> </u>
45 A	dd the dellar value of a	all of your ontrine from Part 5, including any ontrine for pages you be	ve attached	
		all of your entries from Part 5, including any entries for pages you ha		
<u> </u>				
Pari		arm- and Commercial Fishing-Related Property You Own of interest in farmland, list it in Part 1.	r Have an Interest In.	
46.	Do you own or have a	ny legal or equitable interest in any farm- or commercial fishing-rel	ated property?	
	No. Go to Part 7.			Current value of the portion you own?
	Yes. Go to line 47.			Do not deduct secured claims
				or exemptions
47.	Farm animals			
	Examples: Livestock, p	ouitry, tarm-raised fish		
	✓ No			
	Yes. Describe			

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Deb	otor 1 Daphaney First Name	Middle Name	Last Name	Case number (if known)	
40			Last Name		
48.	Crops-either growing of	or narvested			
	✓ No				
	Yes. Describe				
49	Farm and fishing equip	ment, implements, machinery, fix	tures and tools of trade	<u> </u>	
10.	_	mont, impromonto, maoriniory, na	araroo, and toolo or trad		
	No				
	Yes. Describe				
50.	Farm and fishing suppl	ies, chemicals, and feed			
	No No				
	Yes. Describe				
	Too. Decombe				
51.	Any farm- and commer	cial fishing-related property you	did not already list		
	No				
	Yes. Describe				
				г	
52. A	Add the dollar value of all	of your entries from Part 6, inclu	ding any entries for pag	ges you have attached	
for P	art 6. Write that number	here			
				<u></u>	
	D 11 AH D			INC. I C. I. A. I.	
Part		perty You Own or Have an Int		d Not List Above	
53.		erty of any kind you did not alrea s, country club membership	dy list?		
		, coama, clas memselemp			
	No No				
	Yes. Give specific information				
					·
					_
54. A	Add the dollar value of all	of your entries from Part 7. Write	that number here		
Part	8: List the Totals of	Each Part of this Form			
55.	Part 1: Total real estate,	line 2		P	
5.6	part 2 total vehicles, line	. =			
	•	d household items, line 15			
	•	•	\$900.00	<u></u>	
58.I	Part 4: Total financial as	sets, line 36	\$25.00	<u> </u>	
59.	Part 5: Total business-re	lated property, line 45			
60	Part 6: Total farm- and fi	shing-related property, line 52			
				<u> </u>	
61.	Part 7: Total other prope	erty not listed, line 54		<u> </u>	
62.	Total personal property.	Add lines 56 through 61	\$925.00		+ \$925.00
				Copy personal property total	
					\$925.00
63.	Total of all property on S	chedule A/B. Add line 55 + line 62			Ψ920.00
1					Ì

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Fill in this infor	mation to identify your ca	ase:	
Debtor 1	Daphaney		West
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Sankruptcy Court for the:	Northern	District of Illinois (State)
Case number (If known)			(Otate)

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Identify the Property You Clair	m as Exempt		
1.	Which set of exemptions are you claim	•		
	You are claiming state and federal	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)	
	You are claiming federal exemption	ns. 11 U.S.C. § 522(b)(2)	
2.	For any property you list on Schedule A	I/B that you claim as e	exempt, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: Used Clothing Line from Schedule A/B: 11	\$250.00	\$250.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
	Brief description: Savings account, Bank of America Line from Schedule A/B: 17	\$25.00	\$25.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
3.	✓ No	ery 3 years after that for	375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case?	

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Debtor 1 Daphaney West Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$150.00 description: **✓** \$150.00 **Used Costume Jewelry** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$350.00 description: **✓** \$350.00 **Used Furniture and** 100% of fair market value, up to any **Household Goods** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$150.00 description: **✓** \$150.00 **Used Home Electronics** and Cell Phone 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 07 Brief 735 ILCS 5/12-1001(b) Unknown description: \$0 **Potential Fraud Claim** 100% of fair market value, up to any Against CET applicable statutory limit

Line from

Schedule A/B:

33

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Fill in this info	ormation to identify your ca	ase:				
Debtor 1	Daphaney		West			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case number (If known)	r					
Official	Form 106D					Check if this is an amended filing
Sched	ule D: Credit	ors Who Ha	ve Claims Secu	red by Prop	erty	12/15
more space i			e are filing together, both are e nber the entries, and attach it to			
1. Do any	creditors have claims s	ecured by your proper	ty?			
✓ No.	. Check this box and subr	nit this form to the court v	with your other schedules. You h	ave nothing else to repo	ort on this form.	
Yes	s. Fill in all of the information	n below.				
Part 1: Lis	t All Secured Claims					
for each		ditor has a particular claim,	red claim, list the creditor separately list the other creditors in Part 2. As g to the creditor's name.		Column B Value of collateral that supports	Column C Unsecured portion If any

this claim

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Fill in this in	formation to identify your case:				
	normation to labriary your oaco.				
Debtor 1	Daphaney		West		
	First Name	Middle Name	Last Name		
Debtor 2				_	
(Spouse, if filir	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the: No	orthern	District of Illinois		
0			(State)		
Case numb (If known)				_	
Official	Form 106E/F				Check if this is an amended filing
					_
Sche	dule E/F: Credi	itors Who l	Have Unsecu	red Claims	12/1:
other party	to any executory contracts or				NONPRIORITY claims. List the
claims that the entries known).	B) and on Schedule G: Executor are listed in Schedule D: Credi	itors Who Hold Claims n the Continuation Pag	xpired Leases (Official Form Secured by Property. If mor	re space is needed, copy t	y creditors with partially secured he Part you need, fill it out, number rite your name and case number (if
claims that the entries known). Part 1:	B) and on Schedule G: Executor are listed in Schedule D: Credi in the boxes on the left. Attack	itors Who Hold Claims In the Continuation Pag	xpired Leases (Official Form Secured by Property. If mor ge to this page. On the top o	re space is needed, copy t	y creditors with partially secured he Part you need, fill it out, number
claims that the entries known). Part 1: L 1. Do an	B) and on Schedule G: Executor are listed in Schedule D: Creditin the boxes on the left. Attach	itors Who Hold Claims In the Continuation Pag	xpired Leases (Official Form Secured by Property. If mor ge to this page. On the top o	re space is needed, copy t	y creditors with partially secured he Part you need, fill it out, number
claims that the entries known). Part 1: L 1. Do an	(B) and on Schedule G: Executor are listed in Schedule D: Credit in the boxes on the left. Attach ist All of Your PRIORITY Up y creditors have priority unsec	itors Who Hold Claims In the Continuation Pag	xpired Leases (Official Form Secured by Property. If mor ge to this page. On the top o	re space is needed, copy t	y creditors with partially secured he Part you need, fill it out, number

Total

claim

Priority

amount

Nonpriority

amount

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Debtor 1 Daphaney West Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 ABC Bank \$250.00 Last 4 digits of account number Nonpriority Creditor's Name 6400 West North Avenue When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60707 Elmwood Park Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: V Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt NSF Other. Specify ___ Is the claim subject to offset? Yes 4.2 City of Chicago Parking \$2,720.00 Last 4 digits of account number Nonpriority Creditor's Name 121 N. LaSalle St # 107A When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60602 City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ Parking Tickets Is the claim subject to offset? **✓** No Yes 4.3 Comcast \$175.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11621 E. Marginal Way # 5 As of the date you file, the claim is: Check all that apply. Bankruptcy Dept Contingent Unliquidated 98168 Seattle Washington City Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **✓** Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Offician Yes Schedule E/F: Creditors Who Have Unsecured Claims page 2

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West Debtor 1 Daphaney Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 ComEd \$350.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60181 Oakbrook Terrace Illinois Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Electric Bill Is the claim subject to offset? **✓** No Yes COMENITY BANK/ASHSTWRT \$297.00 Last 4 digits of account number Nonpriority Creditor's Name 2/1/2016 When was the debt incurred? PO BOX Number Street As of the date you file, the claim is: Check all that apply. Contingent 43218 Columbus Ohio Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes **DIVERSIFIED CONSULTANT** 4.6 \$1,365.00 Last 4 digits of account number 1856 Nonpriority Creditor's Name 10550 DÉERWOOD PARK BLVD When was the debt incurred? 4/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent JACKSONVILLE 32256 Florida Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset?

✓ No Yes Other. Specify ORIGINAL CREDITOR: SPRINT

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West Debtor 1 Daphaney Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** Illinois Dept of Human Services Public Aide 4.7 \$15,000.00 Last 4 digits of account number Nonpriority Creditor's Name 160 North Lasalle St. Suite N-1000 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Debt Is the claim subject to offset? **✓** No Yes MIDNIGHT VELVET \$274.00 Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 8/1/2013 1112 7TH AVE Number As of the date you file, the claim is: Check all that apply. Contingent MONROE 53566 Wisconsin Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts CreditCard Other. Specify _ Is the claim subject to offset? **✓** No Yes Midwest Title Loans 4.9 \$1,100.00 Last 4 digits of account number Nonpriority Creditor's Name 2129 S Cicero Ave When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60804 Cicero City Zip Code State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Title Loan Is the claim subject to offset?

✓ No Yes

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West Debtor 1 Daphaney Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Mount Sinai Hospital Medical Center \$1,109.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1500 S Fairfield Ave Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60608 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ Medical Bill Is the claim subject to offset? **✓** No Yes Peoples Gas \$60.00 4.11 Last 4 digits of account number _ Nonpriority Creditor's Name n/a 200 E. Randolph When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60601 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Gas Bill Other. Specify __ Is the claim subject to offset? **✓** No Yes US DEPT OF ED/GLELSI 4.12 \$7,951.00 Last 4 digits of account number 8581 Nonpriority Creditor's Name When was the debt incurred? 11/1/2009 2401 INTERNATIONAL LN Number Street As of the date you file, the claim is: Check all that apply. Contingent MADISON Wisconsin 53704 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Daphaney West Case number (if known) Middle Name First Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Arnold Scott Harris On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 111 W. Jackson # 600 Line 4.2 Part 1: Creditors with Priority Unsecured Claims Street one): Number Part 2: Creditors with Nonpriority Unsecured 60604 Chicago Illinois Last 4 digits of account number City State Zip Code Arnold Scott Harris On which entry in Part 1 or Part 2 did you list the original creditor? 111 W. Jackson # 600 Line 4.10 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Chicago Illinois 60604

Last 4 digits of account number

City

State

Zip Code

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West Last Name Debtor 1 Daphaney First Name Case number (if known) Middle Name

Part 4: Add th	ne Amounts for Each Type of Unsecured Claim					
 Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. 						
			Total claims			
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00			
	6b. Taxes and certain other debts you owe the government	6b.	o. — \$0.00			
	intoxicated	6c.	\$0.00			
		6d.	\$0.00 I.			
	6e. Total. Add lines 6a through 6d.		\$0.00			
			Total claims			
Total claims from Part 2	6f. Student loans	6f.	\$7,951.00			
nom rait 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	J. \$0.00			
	6h. Debts to pension or profit-sharing plans, and other similar debts		n\$0.00			
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$22,700.00			
	6j. Total. Add lines 6f through 6i.	6j.	\$30,651.00			

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Daphaney		West	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or com	pany with whom you have	the contract or lease	State what the contract or lease is for
2.1	Griffin, James Name 4857 W Superio	or St		Residential Lease, Debtor is Lessee, Month to Month Lease for 715 N Lamon
	Number	Street		
	Chicago	Illinois	60644	
	City	State	Zip Code	

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			DC	cument ray	C 31 01 00	
Fill in	this infor	mation to identify your c	ase:			
Debto	or 1	Daphaney		West		
		First Name	Middle Name	Last Name		
Debto (Spous	or 2 se, if filing)	First Name	Middle Name	Last Name		
United	d States E	Sankruptcy Court for the:	Northern	District of Illinois (State)		
	number			(Glate)		
(If know	vn)	·				
					L_1	heck if this is an nended filing
Offi	ادنما	Form 106H				3
OIII	ICIAI	1 01111 10011				
Sch	edul	e H: Your Cod	lebtors			12/15
Codob	tore are	noonlo or ontitios who	are also liable for any de	ate you may have. Be a	s complete and accurate as possible. If two married p	oonlo are
the en	tries in t				space is needed, copy the Additional Page, fill it out, op of any Additional Pages, write your name and case	
1. D	o you ha	ve any codebtors? (If yo	ou are filing a joint case, do	not list either spouse as	a codebtor.)	
Ŀ	√ No					
Ī	Yes					
			lived in a community pro		? (<i>Community property states and territories</i> include Arizon n.)	a, California,
I,	No.	Go to line 3.			•	
Ī	Yes.	Did your spouse, forme	er spouse, or legal equiva	lent live with you at the	time?	
_ <u>-</u>		No		•		
	Ħ,	Yes. In which communit	y state or territory did you	ı live?	Fill in the name and current address of that person.	
		Name of your spouse, f	ormer spouse, or legal equ	ivalent		
		Number Street				
		City	State	Zip C	ode	
		-		·		
3. Ir	n Column	1, list all of your codel	otors. Do not include you	r spouse as a codebtor	if your spouse is filing with you. List the person showr	n in line 2

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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				<u> </u>				
Fill in this informa	tion to identify	your case:						
Debtor 1 Dap	haney		West					
	Name	Middle Name	Last N	ame	Che	ck if this is:		
Debtor 2 (Spouse, if filing) First	Nomo	Middle Name	Last N	omo	– I n	An amended filing		
(opouse, ir rilling) First	. Name	Middle Name				A supplement showing post-petition c	hantor 1	
United States Bank the:	ruptcy Court for	Northern	District of Illi			expenses as of the following date:	парцы	
Case number			(5	itate)				
(If known)						MM / DD / YYYY		
Official For	m 106l							
Schedule I	: Your In	come					12/1	
information about spouse. If more sp number (if known	your spouse. It	f you are separated and, attach a separate shewart a separate shewart and a separate shewart a separate shewa	d your spous	se is not filing	with you, do	r spouse is living with you, incluc not include information about yo onal pages, write your name and	ur	
Fill in your emp	loyment		Debtor 1			Debtor 2		
information.		Employment status						
•	e more than one job,					Employed		
attach a separate information abou			Not Er	nployed		Not Employed		
employers.		Occupation	Bus Service	er Apprentice				
Include part time self-employed w		Employer's name	Chicago T	ransit Authority				
Occupation may or homemaker, i	include student f it applies.	Employer's address	567 West Lake Street Number Street			Number Street		
			Chicago	Illinois	60661	_		
			City	State	Zip Code	City State Zip Co	ode	
		How long employed there?	1 year					
Part 2: Give De	etails About M	Ionthly Income						
		-					au.	
spouse unless you	are separated.	-	•		•	vrite \$0 in the space. Include your nor		
		e more than one employer, et to this form.	combine the	information for	all employers to	r that person on the lines below. If you For Debtor 2 or	u need	
more space, attac	ii a separate silet							
more space, allac	n a separate snet			For I	Debtor 1	non-filing spouse		
2. List monthly	gross wages, sala	ory, and commissions (before calculate what the monthly to		2	\$1,818.42			
List monthly and deductions.) If be.	gross wages, sala	ry, and commissions (before calculate what the monthly v			·			

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Debtor 1Daphaney First Name Middle Name	West Last Name	Case number	(if	
The Charles	Lust Hamo	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$1,818.42		
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$255.54		
5b. Mandatory contributions for retirement plans	5b.	\$0.00		
5c. Voluntary contributions for retirement plans	5c.	\$0.00		
5d. Required repayments of retirement fund loans	5d.	\$0.00		
5e. Insurance	5e.	\$0.00		
5f. Domestic support obligations	5f.	\$0.00		
5g. Union dues	5g.	\$67.28		
5h. Other deductions. Specify:	5h.	+ \$0.00 +		
6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5h$.	e +5f + 5g 6.	\$322.81		
7. Calculate total monthly take-home pay. Subtract line 6 from	line 4. 7.	\$1,495.61		
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses,				
the total monthly net income.	8a.	\$0.00		
8b. Interest and dividends	8b.	\$0.00		
8c. Family support payments that you, a non-filing spouse dependent regularly receive				
Include alimony, spousal support, child support, maintenal divorce settlement, and property settlement.	8c.	\$0.00		
8d. Unemployment compensation	8d.	\$0.00		
8e. Social Security	8e.	\$0.00		
8f. Other government assistance that you regularly receiv Include cash assistance and the value (if known) of any nor cash assistance that you receive, such as food stamps (ben under the Supplemental Nutrition Assistance Program) or housing subsidies Specify:	1-	\$0.00		
8g. Pension or retirement income	8g.	\$0.00		
8h. Other monthly income. Specify:	8h.	+ \$0.00 +		
9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +	8g + 8h. 9.	\$0.00		
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filin	10. g spouse	\$1,495.61 +	=	\$1,495.61
11. State all other regular contributions to the expenses that Include contributions from an unmarried partner, members of y friends or relatives. Do not include any amounts already included in lines 2-10 or a	our household, yo	our dependents, your roomm		
Specify:			1	1. + \$0.00
12. Add the amount in the last column of line 10 to the amount				2.
Write that amount on the Summary of Schedules and Statistica	u Summary of Cert	anı Liabililles and Helated Dati	л, и п applies	\$1,495.61 Combined monthly income
13. Do you expect an increase or decrease within the year af	ter you file this fo	orm?	_	monthly income
Yes. Explain:				

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		Doct	iment Page 34 of 6	3		
Fill in this infor	mation to identify your o	case:				
Debtor 1	Daphaney		West			
Debtor 2	First Name	Middle Name	Last Name	Check if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing	j	
United States E	Sankruptcy Court for the:	Northern	District of Illinois (State)	A supplement sho expenses as of th		-petition chapter 13 date:
Case number			(2)	MM / DD / YYYY		
Official	Form 106J			WINNI / BB / TTTT		
	e J: Your Exp	enses				12/15
information. If			re filing together, both are equal s form. On the top of any addition			
Part 1: Des	cribe Your Househo	ld				
1. Is this a joi	nt case?					
✓ No. Go	to line 2					
Yes. Do	oes Debtor 2 live in a s	eparate household?				
	No					
	Yes. Debtor 2 must fil	le Official Forms 106J-2, Expe	nses for Separate Household of Deb	tor 2.		
2. Do you hav	e dependents? 🕡 N	0				
Do not list D Debtor 2.	ebtor 1 and	es. Fill out this information for ach dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dep	pendent live ?
	penses include f people other	0				
than		es				
yourself and dependents	u youi	30				
Part 2: Estin	mate Your Ongoing	Monthly Expenses				
_	of a date after the bank		you are using this form as a supp oplemental Schedule J, check th	-		•
	-	cash government assistance t on Schedule I: Your Income	-			Your expenses
	or home ownership ex or the ground or lot. 4.	penses for your residence. In	nclude first mortgage payments and		4.	\$500.00
If not incl	uded in line 4:					
4a. Real es	state taxes				4a	\$0.00

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Daphaney West Case number (if known)
First Name Middle Name Last Name

	First Name	Middle Name Last Name		
				Your expenses
6a. Electricity, heat, natural gas 6a. \$150.00 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$65.00 6d. Other. Specify: 6d. \$50.00 7. Food and housekeeping supplies 7. \$350.00 8. Childcare and children's education costs 9. \$75.00 9. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 11. \$20.00 11. Medical and dental expenses 11. \$20.00 11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$100.00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Instantance. 15. \$0.00 15. Instantance deducted from your pay or included in lines 4 or 20. 15. \$0.00 15. Life insurance. 15c. \$0.00 \$0.00 15. Life insurance. 15c. \$0.00	5. Additional mortgage paymen	nts for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$55.00 6d. Other, Specify: 7. \$350.00 7. Food and housekceping supplies 7. \$350.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$70.00 11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$100.00 10. not include care payments. 12. \$100.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15. \$0.00 15c. Vehicle insurance deducted from your pay or included in lines 4 or 20. 15a. \$0.00 15c. Vehicle insurance 15b. \$0.00 15c. Vehicle insurance 15c. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or inc	6. Utilities:			
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. Other. Specify: 7. Food and housekeeping supplies 8. \$90.00 7. Food and housekeeping supplies 8. \$90.00 9. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$70.00 11. Medical and dental expenses 11. \$20.00 11. Medical and dental expenses 12. \$100.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Leath insurance 15c. Vehicle insurance 15c	6a. Electricity, heat, natural gas	3	6a.	\$150.00
6d. Other. Specify: 6d \$0.00 7. Food and housekeeping supplies 7. \$350.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$70.00 11. Medical and dental expenses 11. \$20.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$100.00 Do not include care payments 13. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15. \$0.00 15a. Lile insurance deducted from your pay or included in lines 4 or 20. 15a. Lile insurance 15b. \$0.00 15b. Health insurance 15c \$0.00 15c. Vehicle insurance. 15c \$0.00 15c. Vehicle insurance. 15c \$0.00 15c. Vehicle insurance. \$0.00 \$0.00 15c. Taxes. Do not included taxes deducted from your pay or included in lines 4 or 20. \$0.0	6b. Water, sewer, garbage coll	ection	6b.	\$0.00
7. Food and housekeeping supplies 7. \$350.00 8. Childran's and childran's education costs 8. \$0.00 9. Citching, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$70.00 11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$100.00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15a \$0.00 Do not include insurance ededucted from your pay or included in lines 4 or 20. 15a \$0.00 15b. Health insurance 15a \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insurance. Specify: 15a \$0.00 15c. Vehicle ins	6c. Telephone, cell phone, Int	ernet, satellite, and cable services	6c.	\$55.00
8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$70.00 11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 16 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18c. Outer insurance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other specify: 19. \$0.00 18. Your payments on the property 20a. Mortgages on other property 20a. Mortgages on the property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning 9. \$75.00 10. Personal care products and services 10. \$70.00 11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$100.00 Do not include car payments 13. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15a \$0.00 15b. Health insurance deducted from your pay or included in lines 4 or 20. 15a \$0.00 15c. Vehicle insurance 15b \$0.00 15c. Vehicle insurance 15c \$0.00 15c. Vehicle insurance. Specify	7. Food and housekeeping sup	plies	7.	\$350.00
10. Personal care products and services 11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance Do not include insurance 15b. \$0.00 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. \$0.00 15d. Other insurance. Specify: 15d. \$0.00 16d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15c. Vehicle insurance. 15c. Vehicle insurance. 15c. Vehicle insurance. 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15c. Vehicle insurance. 15c. Vehicle 15c. \$0.00 16d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15c. Vehicle 15c. Vehicle 15c. \$0.00 17c. Other insurance. Specify: 17c. Car payments for Vehicle 2 17c. Other. Specify: 17c. \$0.00 17c. Other. Specify: 17c. \$0.00 17d. Other. Specify: 17c. \$0.00 18. Your payments for Vehicle 1, Your income (Official Form 1061). 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20a. Real estate taxes. 20b. \$0.00 20b. Real estate taxes. 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses.	8. Childcare and children's edu	acation costs	8.	\$0.00
11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$100.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.00 15b. Health insurance 15b. \$0.00 15c. Vehicle insurance. Specify: 15c. \$0.00 15c. Vehicle insurance. Specify: 15d. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$pecify: 15d. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$pecify: 15d. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 17c. Installment or lease payments: 17a \$0.00 <td>9. Clothing, laundry, and dry cl</td> <td>eaning</td> <td>9.</td> <td>\$75.00</td>	9. Clothing, laundry, and dry cl	eaning	9.	\$75.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. Life insurance 15b. So.00 15b. Health insurance 15c. Vehicle insurance 15c. So.00 16c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Car payments for Vehicle 1 17c. Car payments for Vehicle 1 17d. So.00 17b. Car payments for Vehicle 2 17b. So.00 17c. Other. Specify: 17c. So.00 17c. Other. Specify: 17c. Other. Specify: 17d. So.00 18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19. So.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. So.00 20b. Real estate taxes. 20b. So.00 20c. Property, homeowner's, or renter's insurance 20c. So.00 20d. Maintenance, repair, and upkeep expenses.	10. Personal care products and	d services	10.	\$70.00
Do not include car payments 13. 13. 13. 13. 13. 13. 14.	11. Medical and dental expens	es	11.	\$20.00
14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 00 not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Life insurance 15b \$0.00 15b \$0.00 15c. Vehicle insurance 15c \$0.00 15c. Vehicle insurance. Specify: 15d \$0.00 15d. \$0.00 \$0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$0.00 16. \$0.00	_	maintenance, bus or train fare.	12.	\$100.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.00 15b. Health insurance 15b. \$0.00 15c. Vehicle insurance 15c. \$0.00 15d. Other insurance. Specify: 15d. \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. \$0.00 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 18. Your payments you make to support others who do not live with you. Specify: 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. \$0.00 20d. Maintenance, repair, and upkeep expenses.	13. Entertainment, clubs, recre	ation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$0.00 15c. Vehicle insurance 15c \$0.00 15d. Other insurance. Specify: 15d \$0.00 15d. Other insurance. Specify: 16 \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 \$0.00 17. Installment or lease payments: 17a \$0.00 17b. Car payments for Vehicle 1 17a \$0.00 17c. Other. Specify: 17b \$0.00 17c. Other. Specify: 17c \$0.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	14. Charitable contributions ar	d religious donations	14.	\$0.00
15b		ucted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
Specify:			15c	\$0.00
Specify:	15d. Other insurance. Specify:		15d	\$0.00
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.	16. Taxes. Do not include taxes of	deducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. S0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. \$0.00 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	17. Installment or lease payme	nts:		
17c. Other. Specify:	17a. Car payments for Vehicle	1	17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehicle	2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20c. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00			17d	\$0.00
19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				\$0.00
Specify:			18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00		o support others who do not live with you.	10	\$0.00
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		s not included in lines 4 or 5 of this form or on Schedule I: Your Income	19.	
20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00			20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	20c. Property, homeowner's,	or renter's insurance		
	20d. Maintenance, repair, and	upkeep expenses.		
	20e. Homeowner's association	n or condominium dues	20e	\$0.00

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Daphaney		West	
	First Name	Middle Name	Last Name	,
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

Official Form 106Dec

U.S.C. §§ 152, 1341, 1519, and 3571.

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

If two married people are filing together, both are equally responsible for supplying correct information.

12/15

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18

Par	Sign Below		
	Did you pay or agree to pay someone who is NOT an attorney to h	help you fill out bankruptcy forms?	
	✓ No		
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and	
×	/s/ Daphaney West	×	
	Signature of Debtor 1	Signature of Debtor 2	
	Date 1/5/2017 MM/DD/YYYY	Date	

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Fill in this info	ormation to identify your o	case:					
Debtor 1	Daphaney		West				
Debtor 2	First Name	Middle Nan	ne Last Nam	e			
(Spouse, if filing)	First Name	Middle Nan	ne Last Nam	е			
United States	Bankruptcy Court for the:	Northern	District of Illino				
Case number	r		(State	0)			
(If known)							Check if this is a
Official	Form 107						amended filing
Stateme	ent of Financia	al Affairs for	Individuals	Filina fo	r Bankru	ptcv	12/1
information.	lete and accurate as po . If more space is neede nown). Answer every q	ed, attach a separa					
Part 1: Giv	ve Details About Your	Marital Status an	d Where You Lived	Before			
1. What i	s your current marital st	atus?					
✓ M	arried						
□ N	ot married						
2. During	ı the last 3 years, have yo	ou lived anywhere of	ther than where you liv	ve now?			
✓ No	0						
	es. List all of the places yo	ou lived in the last 3	years. Do not include v	vhere you live	now.		
De	ebtor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
				Same a	s Debtor 1		Same as Debtor 1
N	umber Street		From	Number Str	oot .		From
_	umber outet		Го				To
Ci	ity State	Zip Code		City	State	Zip Code	
				Same a	s Debtor 1		Same as Debtor 1
Nı	umber Street		From	Number Str	eet		From
_		-	Го				То
Ci	ity State	Zip Code		City	State	Zip Code	
3. Within t and territ	he last 8 years, did you e tories include Arizona, Califo s. Make sure you fill out S	e ver live with a spou ornia, Idaho, Louisian	a, Nevada, New Mexico,	in a communit Puerto Rico, T	y property stat	e or territory? (C	

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Debtor	1 Daphaney	West		umber (if known)	
		e Name Last Na	nme		
Part 2:	Explain the Sources of Your Inc	come			
Fil	d you have any income from employm I in the total amount of income you receive tivities. If you are filing a joint case and you not	ved from all jobs and all bus	inesses, including part-time		/ears?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business		Wages, commissions, bonuses, tips Operating a business	
	For last calendar year: January 1 to December 31, 2016) YYYY	Wages, commissions, bonuses, tips Operating a business	\$20304.27	Wages, commissions, bonuses, tips Operating a business	
	For the calendar year before that: January 1 to December 31, 2015) YYYY	Wages, commissions, bonuses, tips Operating a business	\$4000.00	Wages, commissions, bonuses, tips Operating a business	
pu filir	clude income regardless of whether that in blic benefit payments; pensions; rental in a g a joint case and you have income that teach source and the gross income from No Yes. Fill in the details.	come; interest; dividends; m you received together, list it	noney collected from lawsuits only once under Debtor 1.	; royalties; and gambling and	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:				
	For last calendar year: (January 1 to December 31,				
	For the calendar year before that: (January 1 to December 31,	Link	\$1,848.00		

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West Debtor 1 Daphaney __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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tor 1	Daphaney			W	est	Case number	(if known)
	First Name		Middle Name	La	st Name		
Insi corp agei	ders include your porations of whic	relatives; a h you are a for a busir	any general partners an officer, director, ness you operate as	s; relatives of any person in control	general partners; part, or owner of 20% or	nerships of which y more of their voting	who was an insider? you are a general partner; g securities; and any managing r domestic support obligations,
V	No						
靣	Yes. List all pay	ments to	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
insid Inclu	der?	-	I for bankruptcy, of aranteed or cosigne	-	y payments or trans	fer any property o	n account of a debt that benefited an
	Yes. List all pay	ments tha	t benefited an ins	ider.			
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				

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Debtor 1 Daphaney West Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1 Daphaney	West	Case number (if known)	
	First Name Middle Name	Last Name		
11.	accounts or refuse to make a payment because		pank or financial institution, set off any am	ounts from your
	✓ No Yes. Fill in the details.			
		Describe the action the	e creditor took Date action was taken	Amount
	Creditor's Name			-
	Number Street	<u> </u>		
		Last 4 digits of account	number: XXXX-	
	City State Zip Code	<u> </u>		
12.	Within 1 year before you filed for bankruptcy, wa appointed receiver, a custodian, or another office		possession of an assignee for the benefit of	f creditors, a court-
	✓ No			
	Yes			
Part	List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy,	did you give any gifts with a t	otal value of more than \$600 per person?	
	No Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
				_
	Person to Whom You Gave the Gift	_		
	Number Street	_		
	City State Zip Code	_		
	Person's relationship to you			
	Person to Whom You Gave the Gift	_		_
		_		
	Number Street	_		
	City State Zip Code	_		
	Person's relationship to you			

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Debt		Daphaney	West Case nu	mber (if known)	
		First Name Middle Name	Last Name		
	\A/:±	hi 0		-t-llf th	1000 to annual and to 0
14.	WIT	hin 2 years before you filed for bankruptcy, did	you give any gifts or contributions with a t	otal value of more than t	bood to any charity?
	✓	No			
		Yes. Fill in the details for each gift or contribution	n.		
		Gifts or contributions to charities	Describe what you contributed	Date you	Value
		that total more than \$600		contribute	ed
		Charity's Name			
		Number Street			
		City State Zip Code			
Part	6.	List Certain Losses			
	Υ.				
15.	Wi+I	hin 1 year before you filed for bankruptcy or sin	ce you filed for bankruptoy, did you lose a	wthing because of theft	fire other disaster or
		abling?	oc you med for bunkruptoy, and you lose at	lything because of their,	, inc, other disaster, or
	_	No			
	\mathbf{Y}				
	Ш	Yes. Fill in the details.			
		Describe the property you lost and	Describe any insurance coverage for t		
		how the loss occurred	Include the amount that insurance has pa pending insurance claims on line 33 of S		lost
			A/B: Property.	criedule	
Part	7:	List Certain Payments or Transfers			
		ude any attorneys, bankruptcy petition preparers, or No Yes. Fill in the details.		,	
			Beer felter and all and a constant	B.1	
			Description and value of any property transferred	Date payn or transfe was made	r payment
		Semrad Law Firm	Attornovio Eco. 0.00	1/5/2017	\$0.00
		Person Who Was Paid	Attorney's Fee - 0.00	1/3/2011	Ψ0.00
		20 S. Clark Street			
		Number Street			
		28th Floor			
		Chicago Illinois 60603			
		City State Zip Code			
		Email or website address			
			The state of the s		
		Person Who Made the Payment if Not You			
		Person Who Made the Payment, if Not You			
		Person Who Made the Payment, if Not You Person Who Was Paid			
		Person Who Was Paid			
		Person Who Was Paid			
		Person Who Was Paid			
		Person Who Was Paid Number Street City State Zip Code			
		Person Who Was Paid Number Street			

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Debto	or 1 Daphaney	West	Case number (if known)	
	First Name Middle Name	Last Name		
h	Within 1 year before you filed for bankruptcy, on the poor deal with your creditors or to make poon not include any payment or transfer that you list	ayments to your creditors?	ur behalf pay or transfer any property to ar	nyone who promised to
	✓ No Yes. Fill in the details.			
		Description and value of an transferred	property Date payment or transfer was made	Amount of payment
	Person Who Was Paid			
	Number Street			
	City State Zip Code			
t Ii	Within 2 years before you filed for bankruptcy, the ordinary course of your business or financi include both outright transfers and transfers made and transfers that you have already listed on this solution. No Yes. Fill in the details.	al affairs? as security (such as the granting of a		
	_	Description and value of an property transferred	Describe any property or payments received or debts pain exchange	Date transfer was made
	Person Who Received Transfer			
	Number Street	_		
	City State Zip Code Person's relationship to you			
	Person Who Received Transfer			
	Number Street	_		
	City State Zip Code Person's relationship to you			
b	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection devices.) No	, did you transfer any property to a	self-settled trust or similar device of whic	ch you are a
[Yes. Fill in the details.	Description and value of the	he property transferred	Date transfer was made
	Name of trust			

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West Debtor 1 Daphaney Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred Checking XXXX-Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Deb		Daphaney		Vest	Cas	e number (if known)	
		First Name Middle Name	L	ast Name	_		
Part	9:	Identify Property You Hold or Control 1	for Someon	ne Else			
	Do y	you hold or control any property that someo			property you be	orrowed from, are storing for, or hold in	trust for
	som	neone.					
	✓	No					
	Ħ	Yes. Fill in the details.					
	_		Where is t	he property?		Describe the contents	Value
				р. оро. ту.			
		Owner's Name	NumberStr	eet			
							-
		Number Street					
			City	State	Zip Code		
		City State Zip Code					
		Oity State Zip Code					
Part	10:	Give Details About Environmental Info	ormation				
For	the p	urpose of Part 10, the following definitions appl	ly:				
	■ <i>E</i>	nvironmental law means any federal, state, or loc	cal statute or r	egulation cond	erning pollution,	contamination, releases of	
		azardous or toxic substances, wastes, or materia					
	in	cluding statutes or regulations controlling the cl	leanup of thes	e substances,	wastes, or materi	ial.	
	■ Si	ite means any location, facility, or property as de	efined under ar	ny environmen	tal law, whether y	you now own, operate, or utilize it	
	10	rused to own, operate, or utilize it, including dis	sposal sites.				
	■ <i>H</i>	azardous material means anything an environme	ental law defin	es as a hazard	ous waste. hazar	rdous substance.	
		xic substance, hazardous material, pollutant, co				,	
Don	ort all	I notices, releases, and proceedings that you kn	ow about roa	ardless of who	on they accurred		
nep	OIL all	inolices, releases, and proceedings that you kin	ow about, reg	ardiess of write	an they occurred.		
24.	Has	any governmental unit notified you that you	ı may be ilab	le or potentia	illy liable under	or in violation of an environmental law?	•
	V	No					
	Ħ	Yes. Fill in the details.					
	ш		Governme	ntal unit		Environmental law, if you know it	Date of
			Governine	intai uiiit		Liviloninental law, ii you know it	notice
		Name of site	Governmer	ntal unit			
		N. and an Olmani	Nl Ol	1			
		Number Street	NumberStr	eet			
			City	State	Zip Code		
			City	State	Zip Code		
		City State Zip Code					
25.	Hav	e you notified any governmental unit of any	release of ha	zardous mate	erial?		
		No					
	Ш	Yes. Fill in the details.					
			Governme	ntal unit		Environmental law, if you know it	Date of
							notice
		Name of site	Governmer	ntal unit			
		01 010	~ J v oi i i i i i i	rear will			
		Number Street	NumberStr	eet			
			City	State	Zip Code		
		City State Zip Code					
		Oity State ZIP Code					

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Deb		Daphaney			W	/est	Cas	se number <i>(i</i>	f known)		
		First Name		Middle Name	Lá	ast Name					
26.		e you been a part No	y in any judio	cial or administ	rative proce	eeding under	any environmer	ntal law? In	ıclude settler	nents and ord	ers.
	씜	Yes. Fill in the de	tails.								
	ш				Court or ag	gency		Nature	of the case		Status of the
						-					case
		Case title									Pending
					Court Name	•					On appeal
		Case number			NumberStre	eet					
					City	State	Zip Code				Concluded
		0: D-4-: - A					•				
Part	3 11:	Give Details Al	bout Your I	Business or C	onnection	s to Any Bu	siness				
27.	Witl	hin 4 years before	you filed for	bankruptcy, die	d you own a	business or	have any of the	following o	onnections t	o any busines	s?
		A sole propri	ietor or self-e	emploved in a tr	ade. profes	sion. or othe	r activity, either f	full-time or i	part-time		
				oility company (l	-		=				
		A partner in			-, -	, , , , , , , , , , , , , , , , , , ,	,				
			-	anaging executi	ve of a corp	oration					
				of the voting or e	•		poration				
	_	_					•				
		No. None of the									
	Ш	Yes. Check all the	at apply abo	ve and till in the							
					Desc	ribe the nati	ure of the busine	ess			number Do not number or ITIN.
									EIN:	51u. 555u. 11,	
		Business Name			_				LIIV.		
		Number Street			_				Dates busi	ness existed	
					Name	e of account	ant or bookkeep	per			
		City	State	Zip Code	_				From	To	
					Desc	ribe the nati	ure of the busine	ess	Employer I	dentification r	number Do not
									include So	cial Security n	number or ITIN.
		Business Name			_				EIN:		
		Number Street			Name	e of account	ant or bookkeer	ner.	Dates busi	ness existed	
		City	State	Zip Code		e or account	ant of bookkeep	,	From	То	
		J.,	Otato	_,p					110111	10	
					Desc	ribe the nat	ure of the busine	ess			number Do not number or ITIN.
										olal occurry i	iumber of friid.
		Business Name			_				EIN:		
		Number Street			_				Dates husi	ness existed	
		Maniper Street			Nam	e of account	ant or bookkeep	per	Dates Dasi	IIOOO CAISIEU	
		City	State	Zip Code			•		From	To	

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Deb	tor 1 Daphaney		West	Case number (if known)
	First Name	Middle Name	Last Name	
28.	creditors, or other parties.	d for bankruptcy, did yo	ou give a financial stateme	ent to anyone about your business? Include all financial institutions,
	✓ No Yes. Fill in the details belo	W.		
			Date issued	
	Name		MM/DD/YYYY	
	Number Street		_	
	City State	Zip Code	_	
Pari	t 12: Sign Below			
		n fines up to \$250,000,	,	rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature of De	,		Signature of Debtor 2
	Date 1/5/201	7		Date
ı	Did you attach additional page	s to Your Statement of	Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
	✓ No Yes			
	Did you pay or agree to pay sor	neone who is not an at	torney to help you fill out I	pankruptcy forms?
ı	✓ No			
i	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Daphaney West	Northern District of in	Case No.	
_	Debtor			(If known)
			Chapter	Chapter 13
	DISCLOSURE OF COI	MPENSATION OF	ATTORNEY F	OR DEBTOR
1	. Pursuant to 11 U.S.C. § 329(a) and Fed. Ba compensation paid to me within one year b rendered or to be rendered on behalf of the	efore the filing of the petition i	n bankruptcy, or agreed to	o be paid to me, for services
	For legal services, I have agreed to accept			\$4,000.00
	Prior to the filing of this statement I have re	ceived		\$0.00
	Balance Due			\$4,000.00
2	. The source of the compensation paid to me	ewas:		
	Debtor	Other (specify)		
3	. The source of the compensation paid to me	is:		
	✓ Debtor	Other (specify)		
4	. I have not agreed to share the above-dimembers and associates of my law firm	sclosed compensation with an	y other person unless the	ey are
	I have agreed to share the above-disclomembers or associates of my law firm. the people sharing in the compensation	A copy of the agreement, toge		
5	 In return for the above-disclosed fee, I have a. Analysis of the debtor's financial sit bankruptcy; 			
	b. Preparation and filing of any petition	n, schedules, statements of aff	airs and plan which may b	pe required;
	c. Representation of the debtor at the	meeting of creditors and confi	rmation hearing, and any a	adjourned hearings thereof;
	d. Representation of the debtor in adv	ersary proceedings and other o	contested bankruptcy mat	ters;
6	. By agreement with the debtor(s), the above-	disclosed fee does not include	e the following services:	
		CERTIFICATION		
	I certify that the foregoing is a complete state tor(s) in this bankruptcy proceedings.	ment of any agreement or arra	ngement for payment to r	ne for representation of the
	1/5/2017		/s/ Ryan P Crotty	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1 717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

		filing fee administrative fee
+	<u> </u>	
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	West, Daphaney	Casa No	Case No.		
	Debtor(s)	Case No.	Case NO.		
		Chapter.	Chapter13		
	VERIFI	CATION OF CREDITOR MAT	ΓRIX		
Tr knowledge	•	fy that the attached list of creditors is to	rue and correct to the best of their		
Date:	1/5/2017	/s/ West, Dapha West, Daphaney Signature of De	/		

US DEPT OF ED/GLELSI 2401 INTERNATIONAL LN MADISON , 53704

DIVERSIFIED CONSULTANT 10550 DEERWOOD PARK BLVD JACKSONVILLE , 32256

COMENITY BANK/ASHSTWRT PO BOX Columbus , 43218

MIDNIGHT VELVET 1112 7TH AVE MONROE, 53566

Comcast p.o. box 196 Newark , 07101

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park , 60181

Peoples Gas 200 E. Randolph Chicago , 60601

Illinois Dept of Human Services Public Aide 160 North Lasalle St. Suite N-1000 Chicago , 60601

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , 60602

Arnold Scott Harris 111 W. Jackson # 600 Chicago , 60604

Midwest Title Loans 2941 W 159th St Markham, 60428 ABC Bank 6400 West North Avenue Elmwood Park , 60707

Mount Sinai Hospital Medical Center 1500 S Fairfield Ave Chicago , 60608

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Debtor 1 Daphaney First Name	Middle Name	West	Case number (if known)	
Telephone Anni Mandalli Maria	restions for Reporting Purpose	Last Name		
	16a. Are your debts primarily		sumer dehts are define	24 in 11 U.S.C. 6 101/8) ac
16. What kind of debts do you have? 17. Are you filing under	"incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you	al primarily for a personal, y business debts? Busine investment or through the ou owe that are not consu	family, or household ess debts are debts the coperation of the bus	purpose." at you incurred to obtain iness or investment.
Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that		er any exempt property tribute to unsecured cre	is excluded and administrative editors?
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	Security Sec	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?		\$1,000,001-\$1 \$10,000,001-\$ \$50,000,001-\$ \$100,000,001	550 million S100 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be? Pariza Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$1 \$10,000,001-\$ \$50,000,001-\$ \$100,000,001-	550 million 3100 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	I have examined this petition, a	nd I doolors under panelte	of parisments at the circle	
For you	correct. If I have chosen to file under Chof title 11, United States Code, under Chapter 7. If no attorney represents me an out this document, I have obtain I request relief in accordance will understand making a false state connection with a bankruptcy of	napter 7, I am aware that I I understand the relief av d I did not pay or agree to ned and read the notice re ith the chapter of title 11, tement, concealing prope case can result in fines up	may proceed, if eligib ailable under each cha pay someone who is equired by 11 U.S.C. § United States Code, s rty, or obtaining mone	le, under Chapter 7, 11,12, or 13 apter, and I choose to proceed not an attorney to help me fill § 342(b). specified in this petition.
	both. 18 U.S.C. §§ 152, 1341,	1519, and 3571.	Signature of Debtor Executed on	

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Fill in this infor	mation to identify your	GRSC)			
Debtor 1	Daphaney		West	(Anna Carlos Car	
Debtor 2	First Name	Middle Name	Last Name	_	
(Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States E	Bankruptcy Court for the:		District of Illinois		
Case number			(State)		
(If known)				-	
Official	Form 106De	<u> </u>		Local Local	Check if this is ar amended filing
Declarat	ion About an	Individual Debto	r's Schedules		12/15
If two married	people are filing toget!	ner, both are equally respons	ible for supplying correct i	nformation.	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
Santific Sign	Below	eone who is NOT an attorney	TOM CONTROL STATE CROSS CONTROL CONTRO	550,000, or imprisonment for up to 20 years, o	scheduling power conservation and the minimum
IZI No		and the terror an attention	to neip you an out banktu	prcy torms:	
Land.	lame of person				
tions of the same	tarre or person		_ Attach Bankruptcy Peti Signature (Official Form	ition Preparer's Notice, Declaration, and n 119).	
		,			
Under pen	alty of perjury, I declar are true and correct.	re that I have read the summ	ary and schedules filed wil	h this declaration and	:
/s/ Dapha	The state of the s	of WM	X		
_	*		Signature of	Debtor 2	
Date 1/5/2 MM/	DD/YYYY		Date MM/	DDWYYY	
	ere ere er		:VIIVI/L	10/11/1	

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Debtor 1	Daphaney First Name		West	Case number (if known)
	rist Name	Middle Name	Last Name	
8. Witi	hin 2 years before you ditors, or other parties	ı filed for bankruptcy, did y s.	you give a financial state	ment to anyone about your business? Include all financial institutions
Former A	No Yes. Fill in the details	te alann		
L	165. Fill III the Getails	below.		
			Date issued	
	Name		MM/DD/YYYY	
	Number Street			
	City S	tate Zip Code		•
		•		
	Ciam Dalam			
I have	Sign Below	this Statement of Financia	ial Affairs and any attach	ments, and I declare under penalty of perjury that the answers are
I have	e read the answers on and correct. I understa kruptcy case can resu /s/ Dapi	and that making a faise state in fines up to \$250,000,	atement, concealing pro:	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
I have	e read the answers on and correct. I understa kruptcy case can resu	and that making a faise state in fines up to \$250,000,	atement, concealing pro:	perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
I have	e read the answers on and correct. I understa kruptcy case can resu /s/ Dapi	and that making a faise state in fines up to \$250,000, haney West	atement, concealing pro:	perty, or obtaining money or property by fraud in connection with 0 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
I have true a a ban	e read the answers on and correct. I understackruptcy case can results /s/ Dapli Signature o	haney West Lebel 17	atement, conceating prop , or imprisonment for up t	Signature of Debtor 2 Date
I have true a a ban	e read the answers on and correct. I understackruptcy case can result /s/ Dapi Signature of Date 1/5/2 ou attach additional page 2 of 2 o	haney West Lebel 17	atement, conceating prop , or imprisonment for up t	perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2
I have true a a ban	e read the answers on and correct. I understackruptcy case can result /s/ Dapi Signature of Date 1/5/2 ou attach additional page 2 of 2 o	haney West Lebel 17	atement, conceating prop , or imprisonment for up t	Signature of Debtor 2 Date
I have true a a ban	e read the answers on and correct. I understackruptcy case can result /s/ Dapi Signature of Date 1/5/2 ou attach additional pages	haney West Lebel 17	f Financial Affairs for Indi	Signature of Debtor 2 Date viduals Filing for Bankruptcy (Official Form 107)?
I have true a a ban	read the answers on and correct. I understackruptcy case can result /s/ Dapl Signature of Date 1/5/2 ou attach additional properties.	haney West Debtor 1 2017 ages to Your Statement of	f Financial Affairs for Indi	Signature of Debtor 2 Date viduals Filing for Bankruptcy (Official Form 107)?

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

West, Daphaney	Cana Ma	Case No.		
Debtor(s)	Case No.	Case No.		
	Chapter.	Chapter13		
VERIF	ICATION OF CREDITOR MAT	TRIX		
above named Debtors hereby ver	ify that the attached list of creditors is tr	rue and correct to the best of their		
1/5/2017	/s/ West, Daphar West, Daphaney			
	VERIF	VERIFICATION OF CREDITOR MAT above named Debtors hereby verify that the attached list of creditors is tr		

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Debtor	1 Daphaney		West	Case number (it known)	
	First Name	Middle Name	Last Name	Oase Hamber prenowny	
16. C	alculate the median far	mily income that applies to	you. Follow these ste	ps:	
1	6a. Fill in the state in which	ch you live.	Illinois		
1	6b. Fill in the number of p	people in your household.	1	_	
1	household	ily income for your state and and and in the separate instructions	To fi	nd a list of applicable median income amounts, may also be available at the bankruptcy clerk's o	\$50,133.00 go online
17. H	ow do the lines compar				31100.
1	7a. Line 15b is less t under 11 U.S.C.	han or equal to line 16c, On t § 1325(b)(3). Go to Part 3. [he top of page 1 of th o NOT fill out <i>Calcula</i>	is form, check box 1, <i>Disposable income is no</i> <i>ntion of Disposable Income</i> (Official Form 122C	t determined -2).
1	U.S.C. § 1325(b)	than line 16c. On the top of p l(3). Go to Part 3 and fill out current monthly income from	Calculation of Disp	neck box 2, <i>Disposable income is determined u</i> osable Income (Official Form 122C-2). On lin	nder 11 ie 39 of that
Part 3:	Calculate Your Cor	mmitment Period Under	11 U.S.C. §1325(b)(4)	
		monthly income from line 1			\$1,786.54
19. D	educt the marital adjus ommitment period under	t ment if it applies. If you are 11 U.S.C. § 1325(b)(4) allows	married, your spouse you to deduct part or	e is not filing with you, and you contend that ca f your spouse's income, copy the amount from	lculating the line 13.
15	a. If the marital adjustme	ent does not apply, fill in 0 on	line 19a.		-\$0.00
	b. Subtract line 19a fro				\$1,786.54
20. C	alculate your current m	onthly income for the year.	Follow these steps:		
20	la. Copy line 19b.				\$1,786.54
	Multiply by 12 (the nu	imber of months in a year).			x 12
20	b. The result is your cum	ent monthly income for the ye	ear for this part of the t	form.	\$21,438.48
20	c. Copy the median fami	ily income for your state and s	ize of household from	ine 16c.	\$50,133.00
21. H	ow do the lines compare				
Service Control	Line 20b is less than ling commitment period is 3	ne 20c. Unless otherwise orde 3 years. Go to Part 4.	red by the court, on t	he top of page 1 of this form, check box 3, The	•
2000	Line 20b is more than 4, The commitment pe	or equal to line 20c. Unless of eriod is 5 years. Go to Part 4.	herwise ordered by th	e court, on the top of page 1 of this form, chec	k box
Part 45	Sign Below				
	By signing here, I decla	re under penalty of perjury tha	at the information on t	his statement and in any attachments is true an	d correct.
		and the second s			
	/s/ Daphaney W Signature of Debtor		<u>u</u> ×	Signature of Debtor 2	
	Date 1/5/2017 MM/DD/YYY	₹		Date MM/DD/YYYY	
			.	CONTRACTOR ()	
	If you checked 17b, fill above.	NOT fill out or file Form 1220 out Form 1220-2 and file it w	ith this form. On line	39 of that form, copy your current monthly inco	ome from line 14
			*		

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Daphaney West	Notificin Digition	Case No.	
_	Debtor	**************************************	***************************************	(If known)
			Chapter	Chapter 13
	DISCLOSURE OF (COMPENSATION	I OF ATTORNEY F	OR DEBTOR
1	. Pursuant to 11 U.S.C. § 329(a) and Fe compensation paid to me within one y rendered or to be rendered on behalf of	ed. Bankr. P. 2016(b), I certify year before the filing of the pe	that I am the attorney for the abo	ovenamed debtor(s) and that
	For legal services, I have agreed to accommod to accommod to accommod to the services of the s	cept		\$4,000.00
	Prior to the filing of this statement I have	ave received		\$0.00
	Balance Due			\$4,000.00
2	. The source of the compensation paid	to me was:		**************************************
	Debtor	Other (specify)		
3.	. The source of the compensation paid	to me is:		
	Debtor	Other (specify)		
4.	I have not agreed to share the abomembers and associates of my law	ove-disclosed compensation v w firm.	with any other person unless the	y are
	I have agreed to share the above-or members or associates of my law the people sharing in the compensation.	firm. A copy of the agreement	a other person or persons who a t, together with a list of the name	ere not es of
5.	. In return for the above-disclosed fee, I a. Analysis of the debtor's financ bankruptcy;	have agreed to render legal s ial situation, and rendering ac	ervice for all aspects of the bank dvice to the debtor in determining	ruptcy case, including: g whether to file a petition in
	b. Preparation and filing of any po	etition, schedules, statements	s of affairs and plan which may b	e required;
	c. Representation of the debtor a	t the meeting of creditors and	l confirmation hearing, and any a	adjourned hearings thereof;
	d. Representation of the debtor in	n adversary proceedings and o	other contested bankruptcy matt	ers;
6.	By agreement with the debtor(s), the al	bove-disclosed fee does not i	nclude the following services:	
		CERTIFICAT	NOT	
l debt	certify that the foregoing is a complete or(s) in this bankruptcy proceedings.	statement of any agreement of	or arrangement for payment to m	ne for representation of the
	1/5/2017		/s/ Ryan P Crotty	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	



UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN **CHAPTER 13 DEBTORS AND THEIR ATTORNEYS**

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments. DW,

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



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D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$387.00
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$77.00 for expenses, leaving a balance due of \$4,387.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 1/5/2017	
Signed:	
/s/ Daphaney West Deptor(s)	/s/ Ryan P Crotty Attorney for Debtor(s)
Debtor(s)	Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.